

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003956

FILED
Mar 11, 2009
Secretary of State

Entity Name: TERRA LAGO HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O BRISTOL MANAGEMENT SERVICES, INC
1930 COMMERCE LANE, SUITE 1
JUPITER, FL 33458

New Principal Place of Business:

Current Mailing Address:

C/O BRISTOL MANAGEMENT SERVICES, INC
1930 COMMERCE LANE, SUITE 1
JUPITER, FL 33458

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

INGLIS, STEVE
C/O BRISTOL MANAGEMENT SVCS, INC
1930 COMMERCE LANE, SUITE 1
JUPITER, FL 33458 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: STEIN, PETER
Address: 10440 TERRA LAGO DR
City-St-Zip: WEST PALM BEACH, FL 33412

Title: VD () Delete
Name: KRONINGOLD, ALLAN
Address: 10360 TERRA LAGO DR
City-St-Zip: WEST PALM BEACH, FL 33412

Title: T () Delete
Name: MILTZ, CELIA
Address: 10445 TERR LAGO DR
City-St-Zip: WEST PALM BEACH, FL 33412

Title: S () Delete
Name: CHASKIN, JAY
Address: 10330 TERRA LAGO DR
City-St-Zip: WEST PALM BEACH, FL 33412

Title: D () Delete
Name: FLASHNER, ROBERT
Address: 10305 TERRA LAGO DR
City-St-Zip: WEST PALM BEACH, FL 33412

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER STEIN

PD

03/11/2009

Electronic Signature of Signing Officer or Director

Date